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PTO/SB/01 (12-97)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration
Submitted
with Initial
Filing
OR
☒ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number 2368/12

First Named Inventor Kevin Delos Parris

COMPLETE IF KNOWN

Application Number 09/771,383

Filing Date January 25, 2001

Group Art Unit TBA

Examiner Name TBA

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CRYSTAL STRUCTURE OF ACYL CARRIER PROTEIN SYNTHASE AND ACYL
CARRIER PROTEIN SYNTHASE COMPLEX**

the specification of which (Title of the Invention)

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY) 01/25/2001 as United States Application Number or PCT International

Application Number 09/771,383 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/178,639	01/28/2000	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number

OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Morton Amster	16,677	Joel E. Lutzker	29,406
Michael J. Berger	25,829	Ira E. Silfin	33,785
Daniel S. Ebenstein	24,932	Leonard S. Sorgi	33,211
Kenneth P. George	30,259	Neil M. Zipkin	27,476
Phillip H. Gottfried	25,871	Craig J. Arnold	34,287
Abraham Kasdan	32,997	Elie Gendloff	44,704
Anthony F. Lo Cicero	29,401		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below

Name	Craig J. Arnold, Esq.		
Address	Amster, Rothstein & Ebenstein		
Address	90 Park Avenue		
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		Fax	(212) 286-0854

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
Kevin Delos		Parris	
Inventor's Signature	Date		10/18/01
Residence: City	Auburndale	State	MA
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Post Office Address			
City	Auburndale	State	MA
		ZIP	02466
		Country	U.S.A.

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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DECLARATION

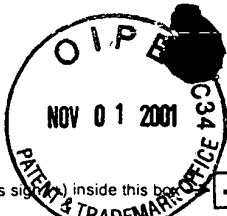
ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
William Stuart				Somers			
Inventor's Signature				Date	10/18/01		
Residence: City	Cambridge	State	MA	Country	U.S.A.	Citizenship	U.K.
Post Office Address	20 Mead Street, #2						
Post Office Address							
City	Cambridge	State	MA	ZIP	02140	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Amy Szepui				Tam			
Inventor's Signature				Date	10/18/01		
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Post Office Address							
City	Framingham	State	MA	ZIP	02155 (A)	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Laura				Long Lin			
Inventor's Signature				Date	10/18/01		
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Post Office Address	50 Golden Ball Road						
Post Office Address							
City	Weston	State	MA	ZIP	02493	Country	U.S.A.

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Mark Lloyd				Stahl			
Inventor's Signature		<i>M L Stahl</i>		Date		10-18-01	
Residence: City		Lexington		State		MA	
				Country		U.S.A.	
Post Office Address		36 N. Hancock Street					
Post Office Address							
City		Lexington		State		MA	
				ZIP		02420	
				Country		U.S.A.	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			
Inventor's Signature				Date			
Residence: City		XXXXXXXXXXXX		State		XXXXXX	
				Country		XXXXXXXXXX	
Post Office Address		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX					
Post Office Address							
City		XXXXXXXXXXXX		State		XXXXXX	
				ZIP		XXXXXX	
				Country		XXXXXXXXXX	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX				XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX			
Inventor's Signature				Date			
Residence: City		XXXXXXXXXXXX		State		XXXXXX	
				Country		XXXXXXXXXX	
Post Office Address		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX					
Post Office Address							
City		XXXXXXXXXXXX		State		XXXXXX	
				ZIP		XXXXXX	
				Country		XXXXXXXXXX	

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